

Fees pursuant to the Consolidated Appropriations Act, 2005 (P.L. 108-187)

FEET TRANSMITTAL

For FY 2007 JUN 28 2007

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$2,010) TRADEMADE

Complete if Known	
Application Number	10/086,940
Filing Date	March 1, 2002
First Named Inventor	Sean T. O'Mara
Examiner Name	Annette Fredricka Dixon
Art Unit	3771
Attorney Docket No.	920070.417

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other (please identify): _____

Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input type="checkbox"/> Charge any additional fee(s) or underpayments | <input checked="" type="checkbox"/> Charge any underpayments or credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17 |

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Small Entity		Small Entity		Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES**Fee Description**

	Small Entity	Small Entity
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
51 -20 or HP = 0 X 50 = 0				Fee (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
7 -3 or HP = 1 X 200 = 200			

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 =	/50 =	(round up to a whole number)	x	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Request for Continued Examination

Petition for Extension of Time (3 months)

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	47,435	Telephone	206-622-4900
Name (Print/Type)	Timothy L. Boller			Date	June 28, 2007